

MALIGNANT GROWTHS IN NATIVES OF SIERRA LEONE

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It is impossible to form an opinion on the frequency of malignant growths in natives of West Africa, as the aborigines seldom consult medical men. Nevertheless, it has often been stated that malignant growths are rare or absent in West Africans, and this has been attributed to non-adoption of European habits. As a proof of the alleged relationship between civilised habits and malignant growths, it has been stated that such growths have only been recorded among Creoles who have more or less adopted European habits, and in those living in coastal towns where European influence is active. Thus Renner (1910) states that cancerous and other malignant growths have been increasing among the Creoles of Sierra Leone in recent years, but that they are rare or absent in aborigines. He further states, that although the Fantis of the Gold Coast have been in contact with Europeans for centuries, malignant growths are rare or absent among them, because they have resisted the inroads of European civilisation. Macfie (1922), on the other hand, writing of the prevalent diseases of the Gold Coast, states:—‘Tumours are probably as common as elsewhere, but sarcomas appear to be rather commoner and carcinomas are said to be rare, a belief which may be due to the fact that the hospital clientèle represents only a small and selected portion of the total sick.’ Dyce Sharpe (1923) states that carcinomas are rare, differing in this respect from sarcomas, even among the population of the coastal towns of West Africa. Cameron Blair (1923) states that he has never seen a case of carcinoma or

sarcoma in twenty-two years in Nigeria, and that the occasional carcinomas found by medical men in the coastal regions, occur chiefly in natives who have come in contact with Europeans. It must be borne in mind, however, that Europeanisation, whether or not it were conducive to the spread of malignant growths, would certainly be responsible for intelligent natives afflicted with them consulting medical officers. Thus civilisation may be wrongly blamed for the spread of the disease, when it is only responsible for its diagnosis.

In view of the alleged rarity of malignant growths in West African natives, the following record of seven cases, five of which came under our personal observation between May and November, 1922, may be of interest. Five of these cases occurred in aborigines and two in Creoles.

CASE 1. An aborigine (male Timne, aged 40 circ.) gave a history of an ulcer on the plantar surface of the right foot following an injury. When seen by us there was a fungating growth from the base of a chronic ulcer, which on section proved to be a melanotic sarcoma. There was a large secondary growth in the right groin.

CASE 2. An aborigine (male Timne, aged 60 circ.) had a painful growth on the scrotum which was found on section to be an epithelioma.

CASE 3. A Creole (male, aged 58) had an ulcer which commenced on the upper lip. Sections showed the ulcer to be an epithelioma. There were secondaries in the glands of the neck on both sides.

CASE 4. An aborigine (male Timne, aged 50 circ.) had a tumour on the right side in the temporal region, exophthalmos of the right eye and complete hemiplegia on the left side. *Post-mortem*: Meningo-sarcoma which had destroyed a large area of bone on the right side, involving the temporal, frontal parietal and sphenoidal bones, infiltrated the muscles and subcutaneous tissue, and also invaded the right orbit. There were large secondaries in the liver.

CASE 5. An aborigine (male Mandingo, aged 28 circ.) died in the Colonial Hospital, Freetown. Dr. J. D. Dimock, W.A.M.S., found a tumour in the liver, which he kindly presented to the Sir A. L. Jones Research Laboratory. Sections of the tumour showed it to be primary carcinoma of the liver.

CASE 6. A Creole (female, aged 42) complained of debility. *Post-mortem*: Tumour of the liver, which on section proved to be a primary carcinoma.

CASE 7. Dr. C. H. Allan, W.A.M.S., sent a piece of liver containing growth which he obtained from a post-mortem on an aborigine (Sherbro). Sections showed the liver to be invaded by a secondary carcinoma.

In addition to the above material, we examined a tumour of the breast which Capt. M. Jackson, W.A.M.S., removed from a Mende woman, aged 50 (circ.). The tumour on section proved to be a carcinoma.

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